

Horncastle Urban District



ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

1938

GEORGE A. W. NEILL, M.D., B.Ch., D.P.H.

W. K. MORTON & SONS,
PRINTERS,
HORNCASTLE.

Horncastle Urban District Council.

COUNCIL.

1938 (*Mid-year*).

Chairman:

Mr. R. H. BELL, J.P.

Vice-Chairman:

Mr. J. T. FRISKNEY.

Mr. C. Auckland.
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Clerk:

RICHARD CHATTERTON (Solicitor).

Medical Officer of Health:


G. A. W. NEILL, M.D., B.Ch., D.P.H.

Sanitary Inspector and Housing Estates Manager:

F. WEEBER, M.S.I.A., M.Inst.M. & Cy.E.

Inspector of Common Lodging Houses.

F. LUSBY.



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TO THE CHAIRMAN AND MEMBERS,

The Horncastle Urban District Council.

Mr. Chairman and Gentlemen,

I have the honour to present to you the Annual Report of the Medical Officer of Health for the Year ended 31st December, 1938. This Report has been prepared in accordance with the Sanitary Officers (Outside London) Regulations, 1935, Article 17 (5) and The Sanitary Officers Order, 1926, Article 14 (3).

It will be recalled that I took up duties as Medical Officer of Health for the Urban District in April, 1938, consequently this Report is not the record of a full year's progress. In fact, much of the Report deals with the Public Health Problems with which I have been faced since I took over the district. In reviewing conditions in an area such as Horncastle it is difficult for a new-comer from a progressive area where modern conditions prevail to steer between the Scylla of wholesale condemnation and the Charybdis of despairing inactivity. However, during 1938 a start has been made by examining the problems in the light of accepted Sanitary practice and though the rate of progress must necessarily be slow it is hoped to maintain it until all the problems are disposed of.

In general outline the report has been prepared to conform with the instructions of the Minister of Health set out in his Circular No. 1728 of 25th October, 1938, regarding the contents of the Reports of Medical Officers of Health for 1938.

In considering the Statistics and Social Conditions of the area the rise in the death rate to its highest point—for over five years, and at the same time exceeding that of England and Wales in general for the first time in the same period—is a matter of grave concern. The Birth Rate, although 0.07 per thousand higher, represents no increase in the number of births. There were only 32 this year as last year. The fractionally higher figure is arrived at because of the smaller estimated population. A continued recurrence of these figures must eventually have an adverse effect on the prosperity of the Urban District. Can any measure be taken to combat this trend, and what is the explanation of it? These problems are occurring in many other districts similar to Horncastle. Their solution would appear to lie in measures to check the tendency of industry to crowd itself into urban areas, accompanied by the mechanisation of agriculture. The latter results in less scope for employment of the younger generation on the land, while the former offers a higher standard of living and greater amenities for them. As the less wealthy districts are unable to apply direct pressure to check this trend it would seem that their salvation lies in doing all that is possible to improve the local amenities with a view to attracting new industries and their resulting prosperity. That the population of Horncastle is composed largely of persons past middle life is borne out by the fact that cancer and heart disease account for more than half the recorded deaths.

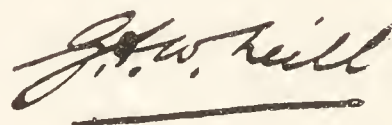
The "Sanitary Circumstances of the Area" and "Housing" are dealt with in detail in the appropriate sections of the Report and on reviewing these it would seem that improvements in these directions would form the first milestone towards a rehabilitation of the Urban District as a thriving town.

In 1938 with the subsidence of the Diphtheria Epidemic infectious disease formed a much less serious problem though the question of adequate infectious diseases hospital accommodation is still requiring solution urgently. Tuberculosis, though showing an increase in the number of notifications, caused fewer deaths. In such a disease, where the development of symptoms is relatively slow, variations from year to year in the number of notifications are of little consequence. The mortality rate from the disease is a truer index of its activity.

In presenting this Report I wish to express my thanks to those who have assisted me and co-operated with me in my work as Medical Officer of Health during 1938.

I have the honour to be, Gentlemen,

Your obedient Servant.

A handwritten signature in dark ink, appearing to read 'J. H. W. Keill', with a horizontal line drawn underneath it.

Medical Officer of Health,
Horncastle Urban District.

22nd May, 1939.

SECTION A.

Statistics and Social Conditions of the Urban District.

GENERAL STATISTICS.

SITUATION. Latitude 53° 12' 30"
Longitude 0° 6' 30"

ELEVATION. Between 50 feet and 120 feet above Sea Level.

AREA OF URBAN DISTRICT. 1,414 acres.

POPULATION. 1931 Census, 3,461.

Mid-1937 (Estimated), 3,440. (Figure- supplied by Registrar
General for calculation of Birth,
Mortality and Death rates.)

DENSITY OF POPULATION: 2.43 persons per acre.

NUMBER OF INHABITED HOUSES: 1,114 (According to rate books
for 1938.)

SUM REPRESENTED BY 1d. RATE: £58 5s. 9d.

RATEABLE VALUE OF URBAN DISTRICT: £15,338.

SOCIAL CONDITIONS.

During the year no change was observed in the general social conditions of Horncastle. The Urban District continues to carry out its functions as Market Town for the Surrounding Agricultural area. It is, however, unfortunately true that, in company with any other similar districts, the growth of motor transport is making itself felt. As a result of this, those with goods to sell and those who wish to buy find it more advantageous to make use of markets situated at larger centres, consequently there is a decline in the market at the smaller market towns such as Horncastle. This is a feature which finds little reflection in the Employment returns but it is one which does affect the general prosperity of the tradespeople in the Urban District. Another aspect of the effect of modern transport in a district such as this is that the younger people are often able to find employment at a distance but at the same time when they become unemployed they are apt to look for work still further afield and in doing so they are returned as unemployed residents of the area in which they are looking for work.

There was the usual seasonal variation in agricultural employment during 1938.

EXTRACTS FROM VITAL STATISTICS FOR 1937.

LIVE BIRTHS.

							Males.	Females.	Total
Legitimate	...	...	...	...	...	...	17	15	32
Illegitimate	...	...	...	...	...	...	—	—	—
									32

Birth Rate per 1,000 estimated resident population:—9.28.

STILL BIRTHS.

							Males.	Females.	Total.
Legitimate	...	...	...	...	...	...	1	—	1
Illegitimate	...	...	...	...	...	...	—	—	—
									1

Still Birth Rate per 1,000 total (Live and Still Births) ... 30.3

Total Birth Rate (Live and Still) per 1,000 population ... 9.59

DEATHS.

Males.	Females.	Total.
32	34	66

(Crude Death Rate per 1,000 population:—19.19.)

DEATH RATE PER 1,000 ESTIMATED POPULATION
(Corrected Death Rate)
13.05.

MATERNAL MORTALITY.

Number of Women dying as a result of Childbirth.

(Headings No. 29 and No. 30 of the Registrar-General's Short List)

							Deaths.	Rate per 1,000 total births.
No. 29.	Puerperal Sepsis	...	...	...	...	...	Nil	0.00
No. 30.	Other Puerperal Causes	...	...	...	...	...	Nil	0.00
Total							Nil	0.00

Maternal Mortality rate per 1,000 total births (Live and Still):—
0.00

DEATH RATE OF INFANTS UNDER ONE YEAR OF AGE.

(There was one death recorded of an infant under one year of age.)

All infants per 1,000 live births	...	...	...	...	...	...	31.25
Legitimate infants per 1,000 Legitimate births	...	...	...	...	...	...	31.25
Illegitimate infants per 1,000 Illegitimate births	...	...	...	...	...	...	0.00

OTHER STATISTICS.

Deaths from Cancer (all ages)	...	...	...	...	...	...	10
„ „ Measles (all ages)	...	...	..	...	...	...	0
„ „ Whooping Cough (all ages)	...	...	...	...	...	...	0
„ „ Diarrhœa (under 2 years of age)	...	...	...	...	...	...	0
„ „ Heart Disease	...	...	...	...	...	...	24

LOCAL STATISTICS.

The lower figure for the estimated population of the Urban District for the year 1938 was more or less expected when the diminished birth rate for 1937 is considered coupled with the increased Death rate for the year under review.

The vital statistics for Horncastle for the past years are shown in Table I. Here the most striking feature is perhaps the marked rise in the death rate from 11.17 in 1937 to 13.05 for the corrected rate in 1938. It is very difficult to attribute this to any one cause but probably the severe climatic conditions experienced towards the end of the year were a potent factor. The Figures for maternal mortality and infantile mortality remain unchanged and this is a matter for great satisfaction.

The Birth rate, which was regarded with considerable concern last year, shows no material sign of increasing and remains for all practical purposes at the same figure, which was the lowest for five years.

Table II shows the relationship between Horncastle and other parts of the country grouped for statistical purposes. Here again the increased death rate for the year becomes noticeable. Last year the rate for Horncastle was below any of the other death rates shown. This year all the other death rates are lower while the Horncastle figures are higher and surpass them all. The statistics relating to infectious diseases shown in this table are on, the other hand, most satisfactory, particularly when it is borne in mind that the Diphtheria epidemic continued well into the new year.

Table III shows the defined causes of death as arranged in the Registrar-General's short list. As before, Heart Disease claims its place as "Captain of the men of Death" in Horncastle, to be followed at a distance by Cancer as the claimant for the second largest number of victims. As was the case in 1937, these two causes accounted for more than half the deaths the total number of deaths between them. It is of interest to note that there were eight more deaths in 1938 than in 1937 from Heart Disease, whilst the increase in the death rate was accounted for by 9 more deaths (1937, 57 deaths; 1938, 66 deaths), thus Heart Disease alone can almost account for the increase.

Both Cancer and Tuberculosis caused fewer deaths in 1938 than in 1937. Cancer accounted for 10 deaths as against 12 in 1937, and Tuberculosis 2 against 4 in 1937. The remaining causes in Table III call for little comment.

TABLE I.
VITAL STATISTICS OF HORNCASTLE FOR PAST 6 YEARS.

Year	Estimated Population	Live Births		Deaths			Maternal Deaths	Infantile Mortality Figure.
		Number	Rate	Number	Crude Rate	Adjusted Rate		
1933	3491	49	14.0	59	16.90	*	*	*
1934	3477	51	14.8	59	16.96	11.53	*	*
1935	3461	51	14.73	58	16.76	11.39	*	*
1936	3486	51	13.76	55	15.77	10.75	*	*
1937	3475	32	9.21	57	16.43	11.17	0	31.25
1938	3440	32	9.28	66	19.19	13.05	0	31.25

* Figures not available.

NOTE.—All rates per 1,000 estimated population.

Infantile Mortality figure per 1,000 Live Births.

TABLE II.

Birth-rates, Death-rates, Analysis of Mortality, Maternal Death-rates, and Case-rates for certain Infectious Diseases in the year 1938.

England and Wales, London, 126 Great Towns and 148 Smaller Towns compared with Horncastle.

	England and Wales	126 County Boro's and Great Towns including London	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	London Administrative County	Horncastle Urban District
	Rates per 1,000 Population.				
Births:—					
Live	15.1	15.0	15.4	13.4	9.28
Still	0.60	0.65	0.60	0.48	0.29
Deaths:—					
All Causes ..	11.6	11.7	11.0	11.4	13.05
Typhoid and Para- typhoid Fevers ..	0.00	0.00	0.00	0.00	—
Smallpox ..	0.00	—	0.00	—	0.00
Measles ..	0.04	0.05	0.03	0.06	0.00
Scarlet Fever ..	0.01	0.01	0.01	0.01	0.00
Whooping Cough ..	0.03	0.03	0.02	0.03	0.00
Diphtheria ..	0.07	0.07	0.06	0.05	0.00
Influenza ..	0.11	0.10	0.11	0.06	0.00
Notifications:—					
Smallpox ..	0.00	0.00	0.00	—	0.00
Scarlet Fever ..	2.41	2.60	2.58	2.05	0.00
Diphtheria ..	1.58	1.85	1.53	1.90	2.32
Enteric Fever ..	0.03	0.03	0.04	0.05	0.00
Erysipelas ..	0.40	0.46	0.39	0.46	0.29
Pneumonia ..	1.10	1.28	0.98	0.06	0.29
	Rates per 1,000 Live Births.				
Deaths under 1 year of age	5.3	5.7	5.1	5.7	31.25
Deaths from Diarrhoea and Enteritis under 2 years of age	5.5	7.8	3.6	13.1	—
Maternal Mortality:—					
Puerperal Sepsis ..	0.89	Not available			Nil
Others	2.19				
Total	3.08				
	Rates per 1,000 Total Births (i.e. Live and Still)				
Maternal Mortality:—					
Puerperal Sepsis ..	0.86	Not available			Nil
Others	2.11				
Total	3.08				
Notifications:—					
Puerperal Fever	14.42	18.08	12.51	3.53	Nil
Puerperal Pyrexia				15.46	

TABLE III.

Showing causes of Death as given in the Registrar-General's Short List.

Short List									
No.	Cause of Death.						Males.	Females.	Total
1	Typhoid and Para-typhoid fevers...						—	—	—
2	Measles						—	—	—
3	Scarlet Fever						—	—	—
4	Whooping Cough						—	—	—
5	Diphtheria						—	—	—
6	Influenza						—	—	—
7	Encephalitis Lethargica						1	—	1
8	Cerebro-spinal Fever						—	—	—
9	Tuberculosis of Respiratory System						—	1	1
10	Other Tuberculosis						1	—	1
11	Syphilis						—	—	—
12	General Paralysis of the Insane, Tabes Dorsalis						—	—	—
13	Cancer						5	5	10
14	Diabetes						1	1	2
15	Cerebral Hæmorrhage						4	1	5
16	Heart Diseases						10	14	24
17	Aneurysm						—	—	—
18	Other Circulatory Diseases						1	3	4
19	Bronchitis						2	0	2
20	Pneumonia (all forms)						—	1	1
21	Other Respiratory Diseases ...						—	—	—
22	Peptic Ulcer						—	—	—
23	Diarrhœa (under 2 years)						—	—	—
24	Appendicitis						0	1	1
25	Cirrhosis of Liver						—	—	—
26	Other Liver Diseases						—	1	1
27	Other Digestive Diseases						1	1	2
28	Acute and Chronic Nephritis ...						2	1	3
29	Puerperal Sepsis						—	—	—
30	Other Puerperal Diseases						—	—	—
31	Congenital Debility, Premature Birth, etc.						—	1	1
32	Senility						—	—	—
33	Suicide						—	—	—
34	Other Violence						—	—	—
35	Other Defined Causes						4	3	7
36	Causes Ill-defined or Unknown ...						—	—	—
TOTALS							32	34	66

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES IN THE URBAN DISTRICT.

NURSING IN THE HOME.

The Horncastle District Nursing Association in conjunction with the Lindsey County Council continue to provide the services of two Midwives for Horncastle and the surrounding parishes, while the County Council provides a Nurse for the home nursing of certain cases of infectious disease.

LABORATORY FACILITIES.

As previously, these are provided by the Lindsey County Council at the County Laboratory in Lincoln. The suggestion that a small laboratory be established in Horncastle by the Medical Officer of Health was discussed by the Council during the year and was left in abeyance. This is extremely unfortunate as thereby the control of infectious disease would have been greatly facilitated while a much stricter supervision of the numerous private wells in the Urban District would be possible.

AMBULANCE FACILITIES.

(a) Accident and General.

The British Red Cross Society maintains a Motor Ambulance at Mr. Friskney's Garage in West Street. This is partly maintained by voluntary subscriptions.

(b) Infectious Diseases.

No alteration in the position regarding the provision of ambulance facilities for infectious diseases has taken place, the Urban District still being dependent for this service on other Authorities. However, the excellent spirit of co-operation on the part of the various Isolation Hospital Authorities adjacent to Horncastle, combined with the reduced incidence of infectious disease caused the need of a locally stationed ambulance to be felt less acutely.

TREATMENT CENTRES AND CLINICS.

The Lindsey County Council, as Maternity and Child Welfare, Education and Tuberculosis Authority, maintains Rolleston House, Bridge Street, as a centre for the District, and clinics are held there by the Assistant County Medical Officers. In this connection mention must be made of the ease with which School Medical and Clinical Tuberculosis work can now be co-ordinated with Public Health Administration in the Urban District, due to the fact that the District Medical Officer of Health also holds the appointment of Assistant County Medical Officer. This saves considerable correspondence and allows of administrative control of clinical problems. The Maternity and Child Welfare work is still carried out by a Lady Assistant County Medical Officer who is a specialist in this work.

The Services provided by the County Council in Horncastle include—

MATERNITY AND CHILD WELFARE.

Provision is made for Ante- and Post-natal supervision of expectant mothers and women following confinement, while institutional treatment can be provided for abnormal or difficult cases at confinement in the Maternity Homes at Scunthorpe or Cleethorpes. In the latter case the admission is arranged by the County Medical Officer.

At the infant clinics advice is available on the bringing up of children till they are five years of age. This includes advice on infant feeding and attention to minor ailments, and dried milk is available at wholesale prices and, in certain cases, below cost. Where necessary, arrangements are made for specialist treatment of deformities, defective vision, squint, and tonsils and adenoids.

Home helps are provided by the County Council to assist in the case of large families when the mother is incapacitated by pregnancy and circumstances prevent the employment of help in the usual way. Where home visiting is necessary the County Council's Health Visitor is available.

ARRANGEMENTS FOR THE TREATMENT OF SCHOOL CHILDREN.

The Lindsey County Council Education Committee arranges the Medical Inspection of Schoolchildren at the Schools in the Urban District and also provides the Minor Ailment Clinic. In addition clinics for the correction of Dental and Visual defects are held in Horncastle from time to time. While special arrangements are made in the case of any child who requires Artificial Sunlight, Orthopædic treatment, Ear, Nose and Throat Treatment, special Investigation of Rheumatic Disease or Open Air School treatment, that the child may travel to such other centre where these are conveniently available.

THE TUBERCULOSIS CLINIC AND DISPENSARY.

This provides facilities for the diagnosis of Tuberculosis, medical practitioners being invited to take advantage of consultations with the Assistant County Tuberculosis Officers. Where necessary it is possible through the Clinic to arrange X-ray examinations and other special investigations. In those cases where a practitioner desires a consultation but where the patient is not well enough to attend the Clinic the consultation can be arranged in the patient's home.

In addition the dispensary provides a means whereby sufferers from old standing tubercular lesions can receive continuous supervision and where their financial position renders difficult the provision of extra nourishment this can be readily provided.

DENTAL TREATMENT.

School Children, the pre-school child, expectant and nursing mothers and persons attending the Tuberculosis Clinics are examined and, where necessary, treated. The County Council provides dentures in those cases where, for financial reasons, they cannot otherwise be obtained.

DAYS AND TIMES OF CLINICS.

Clinic.	Day and time.
Dental	By arrangement.
Maternity and Child Welfare	Tuesdays, 2 p.m.
Ophthalmic	By arrangement.
School Clinic (Minor Ailment)	Thursdays, 10 a.m.
Tuberculosis	Thursdays, 10 a.m.

The County Council's scheme makes available for persons resident in Horncastle Urban District the following Centres and Clinics.

Orthopædic: At Spilsby.

Rheumatic and Heart Diseases: At Gainsborough.

Venereal Diseases: At Beaumont Fee, Lincoln.

HOSPITALS.

PUBLIC ASSISTANCE HOSPITALS.

These are provided adequately by the Lindsey County Council.

GENERAL VOLUNTARY HOSPITALS.

The Horncastle and District War Memorial Hospital serves the Urban District admirably.

In the course of the year 13 beds and 2 cots were available.

The Hospital, which during 1937 underwent considerable reconstruction, is equipped to deal with all kinds of Medical and Surgical emergencies, including X-ray examinations.

The Lincoln County Hospital also collects in the Urban District and in certain cases provides Medical and Surgical treatment for persons residing in Horncastle.

INFECTIOUS DISEASES HOSPITALS.

Despite the difficulties experienced during the Diphtheria Epidemic in the later part of 1937 and the beginning of 1938, no provision has been made by the Local Authority to secure a permanent arrangement for hospital isolation and treatment of cases of infectious disease with any neighbouring hospital authority. It will be seen, therefore, that the situation remains unchanged. That is, there is no definite institution to which cases of infectious disease may be sent and, should any considerable outbreak of infectious disease occur it might be extremely difficult to find Hospital accommodation for all who need it.

Eight cases of infectious disease were treated in Hospital during 1938 and of these 6 went to the Grimsby Corporation Hospital and 2 to the North Lindsey Hospital Board's institution at Osgodby. All these were cases of Diphtheria.

It is of interest to note that the Local Authority has decided to exercise its right, under the Public Health Act 1936, Sect. 184, to recover hospital expenses from persons who receive treatment for infectious disease in an Isolation Hospital, or from those responsible for their maintenance. In certain cases where the financial position is such that payment of the full sum would cause embarrassment enquiries are made by the Sanitary Committee and on the result of these a part or the whole

of the amount may be waived. While legal provision is made for such action the question arises as to whether or not it is in the fullest interest of the Public Health. Cases might well arise whereby those responsible might object to removal to hospital in the fear of incurring a large account or from resentment at the thought of having their financial affairs discussed by a committee. Although the necessary legal machinery exists to overcome such an objection by a Justices' order, the difficulties of Public Health Administration might well be increased one hundredfold at a time when such an increase could be ill afforded. It might happen that medical advice would not be sought through the fear of a diagnosis of infectious disease and the consequent removal to hospital. Should this occur it is not difficult to imagine the results especially in certain highly infectious diseases.

In the case of Small-Pox the authority is represented on the Caistor Joint Small-Pox Hospital Board and beds are available in the Board's Hospital at Osgodby.

TUBERCULOSIS HOSPITALS.

Sanatorium and Tuberculosis Hospital treatment are provided by the Lindsey County Council in such cases as require it, either at its own institutions at Branston Hall, Louth or Brumby or by arrangements with other Authorities at such places as Scartho, Kelling Sanatorium in Norfolk or Harlow Wood in Staffordshire (the latter for orthopædic cases).

MATERNITY HOSPITALS.

Maternity Hospital Treatment is provided by the Lindsey County Council as Maternity and Child Welfare Authority for the district. Facilities exist for the treatment of any acute obstetric emergency at the War Memorial Hospital.

SECTION C

SANITARY CIRCUMSTANCES OF THE URBAN DISTRICT.

(Sections C, D, and E include the Report furnished by the Sanitary Inspector under the Sanitary Officers (outside London) order, 1935, Act 27 (18).

WATER SUPPLIES.

Horncastle is fortunate in having an adequate supply of water in a district where by reason of geological formation satisfactory supplies are scarce. The undertaking is managed by a private company. The source of supply is from shallow wells in wold chalk and this calls for a certain amount of supervision owing to the proximity at a higher level of fertilised agricultural land especially following a period of drought or when agricultural operations have been in progress. Arrangements for chlorination are in existence but the provision of a modern Chlorinometer with proper means of estimating and regulating the dosage of free chlorine with a fine degree of accuracy would be highly desirable.

Previously bacteriological examinations have been carried out at regular half-yearly intervals but in the circumstances described above this has been considered inadequate. Consequently three examinations were carried out in the second half of 1938. These analyses were done at the Lindsey County Laboratory, Lincoln.

1st Sample. (taken from tap in Horncastle) 26th August, 1938.
Number of bacteria per ml.

Number of bacteria per ml. ...
On Agar in 48 hours at 22° C. ... 11
On Agar in 48 hours at 37° C. ... 6
Bacterium Coli absent in 100 ml.
Cl. Welchii absent in 10 ml.
Bacteriologically, a satisfactory sample.

No action was necessary following this report.

2nd Sample (taken from tap in Horncastle) 8th November, 1938.

Number of bacteria per ml. ...
On Agar in 48 hours at 37° C. ... 28
On Agar in 48 hours at 22° C. ... 46
Bacterium coli present in 100 ml.,
absent in 10 ml.
Cl. Welchii, absent in 10 ml.
Chemical analysis revealed presence of
Nitrites and Nitrates.

In the opinion of the Medical Officer of Health this sample was below the standard which should be attained for public supply and is more or less what might be expected at the time of year considering the situation of the gathering ground.

On receipt of this analysis the Manager of the Water Company was informed and immediate steps were taken to ensure sufficient chlorination of the water supplied to the Urban District

Sample 3 (taken from tap in Horncastle) 9th December, 1938.

Number of bacteria per ml. ...
On Agar in 48 hours at 22° C. ... 11
On Agar in 48 hours at 37° C. ... Nil
Bacterium coli, absent in 100 ml.
Cl. Welchii, absent in 10 ml.

Chemical analysis revealed the absence of nitrites and only a trace of nitrates.

This sample was satisfactory but in view of the complete absence of organisms growing at 37° C. the question of more rigid control of chlorination should be considered.

It is felt that more frequent examinations of this water would be advisable and this is probably one of the strongest arguments in favour of the establishment of a small laboratory in Horncastle.

In addition to the public supply there are also a number of private wells in the urban district, many of these are in most undesirable situations and a scheme for having samples from them analysed is under consideration. There is no valid reason why every house in the Urban District should not draw its supply from the mains.

SEWERS AND SEWAGE DISPOSAL.

At one point in the Urban District. Namely at the junction of East Street with South Street, the adequacy of the sewers is open to severe criticism. Here five 12" pipes discharge into one 18" pipe. On occasions, when the rainfall is exceptionally heavy the latter becomes so severely taxed that the contents of the sewer force up the man hole cover and escape onto the surface of the road to inundate several shops in the vicinity. In addition complaints have been received by householders that on these occasions sewer contents have been regurgitated

through the gulley-traps on their premises innundating yards and kitchens. It cannot be too strongly stressed that such a state of affairs causes the gravest concern to those responsible for the maintenance of Public Health. The only satisfactory solution is obviously the installation of a sewer at the point which would be adequate in capacity to deal with the flood water. This suggestion was rejected by the Council on the grounds of the heavy expense which would be incurred. However in order to obviate the nuisance in future it was decided to fit non-return ball valves on those Gulley traps liable to regurgitation. This system whilst it will mitigate the present situation as far as private premises are concerned will place a severe strain on sewers which have been "in situ" for some forty years and as a result bursts or leakages will not be entirely unexpected.

The Sewage from the Urban District is dealt with by the Ives patent system followed by land treatment and this system still works fairly satisfactorily. Although no complaints have been received it is doubtful that the sewage is afforded the efficient treatment that would be accorded by a more modern arrangement incorporating Sprinklers. This is particularly true when it is remembered that the effluent is discharged into the River Bain.

RIVERS AND STREAMS.

The Rivers Waring and Bain flow through the Urban District joining at the Western boundary. There is no evidence of gross pollution within the area but despite warnings inhabitants and traders continue to deposit refuse in the rivers. There is one point which ought not to be overlooked when the problems of sewage disposal are considered, namely the stormwater overflow from the main sewer which discharges into the Bain at times of heavy rainfall. It has been stated by various authorities that such an overflow from a sewer can be quite as deleterious as any other sewer content.

CLOSET ACCOMMODATION.

There are still a number of privy vaults and pail closets at houses on sewerage throughfares recommendations regarding the conversion of some of these were placed before the Council during the year but remain in abeyance.

PUBLIC CLEANSING.

The arrangements for this though carried out by the Council by direct labour are hardly in accordance with modern standards. There are two carts, one covered and one closed, the latter being available for part time work only. The dustbins in use are few in number and no effort has been made to encourage their utilisation. The entire town is scavenged only once a fortnight which would hardly appear to be adequate.

The refuse is tipped into a disused brickpit regarding which several complaints were received during the year. A scheme for controlled tipping combined with incineration of combustible material was placed before the Council during the year. A modification of this was adopted which can hardly be described as satisfactory.

This was partly due to the use of the existing incinerator which has been shown to be of a design incapable of dealing adequately with the requirements. A further scheme was prepared but this remains in abeyance pending the re-organisation of the Cleansing arrangements in the Urban District.

**SANITARY.
INSPECTION OF THE URBAN DISTRICT.
TABLE IV.**

**SUMMARY OF TOTAL INSPECTIONS, &c., BY THE
SANITARY INSPECTOR.**

				Inspections made.	Informal Notices Issued.	Statutory Notices Issued.	Sanitary Defects Remedied.
Unsound Food	...	...	...	—	—	—	—
Nuisances	...	...	...	22	10	1	11
Infectious Disease	...	...	...	15	—	—	—
Slaughterhouses and Meat	...	...	...	10	3	—	3
Offensive Trades	...	...	...	4	—	—	—
Bakehouses	...	...	...	13	2	—	2
Cowsheds	...	...	...	20	3	—	1
Dairies	...	...	...	3	—	—	—
Shops Act	...	...	...	—	—	—	—
Drains	...	...	...	14	7	—	7
Movable Dwelling Vans, &c.	...	...	...	2	2	—	2
Rats and Mice order	...	...	...	4	—	—	—
Factories—With Power	...	...	...	9	—	—	—
Without Power	...	...	...	5	2	—	2
				121	29	1	28

Lodging Houses 52 — — —
(separate Inspector, Mr. F. Lusby).

SHOPS ACT.

No action has been necessary or taken in regard to the Shops Act.

SMOKE ABATEMENT.

The town, not being a factory area, has not necessitated any action under this head.

SWIMMING BATHS.

There is a small open-air bath owned and maintained by the Council and this is regularly cleansed, and the purity of the water is assisted by dosage with chloride of lime and soda.

ERADICATION OF BED BUGS.

One house was found to be infested and was fumigated with sulphur di-oxide. The work was done privately by the owner of the premises and no further evidence of infestation was found after this.

SCHOOL HYGIENE.

The conditions in the two elementary schools in the Urban District remain unchanged. Another year having passed without any indication of an early mitigation of the unhygienic conditions which exist there. It is to be hoped that the Lindsey County Council Education Committee will give this urgent matter sympathetic consideration so that establishment of conditions conforming to modern ideas of school hygiene may be expected at an early date in Horncastle. It is difficult to hope for a material improvement in the general health of the district until the school days of the younger generation are spent in surroundings which are maintained in a reasonably sanitary condition.

FACTORIES AND WORKSHOPS.

(Included in Report under Factories Act 1937, Sect. 128.)

There are 28 factories with, and 24 without, mechanical power in the Urban District. These are well maintained, and no serious defect was found during 1938.

The results of inspection are set out below in Table V.

TABLE V.
INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.
(Including those made by Sanitary Inspector)

1. Premises.		Number of	
	Inspections.	Written Notices.	Occupiers Prosecuted.
(1)	(2)	(3)	(4)
Factories—With Mechanical Power	15	—	—
Without „ „	10	2	—
Total ...	25	2	—
2. Defects found in Factories.			
Want of Cleanliness ...	...	...	2
Overcrowding ...	...	...	—
Unreasonable Temperature ...	...	...	—
Inadequate Ventilation ...	...	...	—
Ineffective Drainage of Floors ...	...	...	—
Sanitary Accommodation:			
(a) Insufficient ...	...	...	—
(b) Unsuitable ...	...	...	—
(c) Not Separate for Sexes ...	...	...	—
Other Offences ...	...	...	—
Total ...	...	...	2
Remedied ...	...	...	2

SECTION D.

HOUSING.

Total No. of New Houses erected during the year	...	...	...	7
1. By the Local Authority	...	...	...	—
2. By other Local Authorities	...	...	...	—
3. By other bodies or persons	...	...	...	7
1. Inspection of Dwelling Houses during the Year				
(1.) (a) Total No. of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	15
(b) No. of inspections made for the purpose	...	...	...	15
(2.) (a) No of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	...	...	...	15
(b) No. of inspections made for the purpose	...	...	...	15
(3) No. of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	Nil

(4).	No. of dwelling houses (exclusive of these referred to under the preceeding sub-head) found not to be in all respects reasonably fit for human habitation	5
2.	Remedy of defects during the year without service of formal notices	2
3.	Action under Statutory Powers during the year	
(a)	Proceeding under Sections 9, 10 and 16 of the Housing Act 1936	
(1)	No. of dwelling houses in respect of which notices were served requiring repairs	Nil
(2)	No. of dwelling houses which were rendered fit after service of formal notices.	
(a)	By owner	Nil
(b)	By Local Authority in default of owners ...	Nil
(b)	Proceedings under Public Health Acts.	
(1)	No of dwelling houses in respect of which notices were served requiring defects to be remedied	Nil
(2)	No. of dwelling houses in which defects were remedied after service of formal notices:	
(a)	By owner	Nil
(b)	By Local Authority in default of owners	Nil
(c)	Proceedings under sections 11 and 13 of the Housing Act, 1936.	
(1)	No. of dwelling houses in respect of which Demolition Orders were made	Nil
(2)	No. of dwelling houses demolished in pursuance of Demolition Orders.	Nil
(3)	No. of dwelling houses subject to undertakings ...	Nil
(d)	Proceedings under Section 12 of Housing Act, 1936	
(1)	No. of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
(2)	No. of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ...	Nil
4.	Housing Act, 1936. Part IV. Overcrowding.	
(a)	(1) No. of dwellings overcrowded at the end of the year	7
	(2) No. of families dwelling therein	7
	(3) No. of persons dwelling therein	48
(b)	No. of new cases of overcrowding reported during the year	Nil
(c)	(1) No. of cases of overcrowding relieved during the year	5
	(2) No. of persons concerned in such cases	33
(d)	No. of houses again overcrowded after being previously relieved	Nil

SECTION E.

CONTROL AND SUPERVISION OF FOOD.

MILK SUPPLY.

The Cowsheds in the district have been visited periodically, all those retailing milk, 3 times during the year. The grooming of the cows and the general cleanliness has been improved. There were only three minor contraventions of the Byelaws, which have been remedied.

MEAT.

All the Slaughterhouses have been visited at frequent intervals and a certain number of carcasses inspected. Three minor infringements of the Byelaws were found and remedied by informal notice. Generally the quality of meat in Horncastle is very good. The butchers co-operate most willingly and any unfit meat is immediately surrendered. The greater number of the inspections are actually done by the Medical Officer of Health.

TABLE VI.
CARCASSES INSPECTED AND CONDEMNED.

	Cattle exc'ding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
No. killed.	410	6	28	1723	1162
No. Inspected.	20	5	1	46	44
All diseases except Tuberculosis.					
Whole carcasses condemned.	Nil	Nil	Nil	Nil	Nil
Carcasses of which some part or organ was condemned.	Nil	2	Nil	Nil	Nil
% of the no. inspected affected with disease other than tubercolosis.	Nil	33%	Nil	Nil	Nil
Tuberculosis Only.					
Whole carcasses condemned.	Nil	2	Nil	Nil	Nil
Carcasses of which some part or organ was condemned.	1	Nil	Nil	Nil	Nil
% of the no. inspected affected with tubercolosis.	5%	33%	Nil	Nil	Nil

SECTION F.
PREVALENCE OF AND CONTROL OVER INFECTIOUS AND
OTHER DISEASES.

NOTIFIABLE INFECTIONS DISEASES.

With two exceptions, all the notifications received during 1938 were of diphtheria.

Of these 4 represented the latter cases of the Diphtheria Epidemic which commenced in September, 1937, and the remaining 4 cases were sporadic ones which occurred during the summer months. That this epidemic resolved itself so rapidly is largely due to the response that was received to the offer of Free Immunisation made by the Council. One most interesting feature arises from this epidemic. The last case of the series spoken of as the epidemic was notified on the 16th of January, 1938, or just about twelve weeks from the completion of the immunisation of the bulk of the Children in the District. This is obviously more than a coincidence when it is considered that immunisation becomes effective at the end of three months after the administration of the prophylactic.

The sporadic cases are also of interest in that so few of them were notified. Experience has shown that such sporadic cases are usually fairly numerous following an epidemic. Here again the question arises: How much of this has been due to the effects of immunisation?

It is unfortunately impossible to say exactly how many children were immunised during 1938, as it was not until May, 1938, that a revised scheme was adopted by the Council. However, this new scheme includes a comprehensive system of record keeping so that in future it will be possible to trace the history of every child immunised from that date. It cannot be stressed sufficiently that the only known method of preventing outbreaks of diphtheria such as that experienced in Horncastle is by the immunisation of the entire child population from 2 years of age upwards. The Council has done its share by providing the facilities to prevent the disease; it remains now for the public to play its part by making full use of these facilities rather than listening to the counsels of cranks who have not the interests of their children at heart.

The remaining notifications comprised one each of pneumonia and erysipelas.

There was a death from Encephalitis Lethargica transferred for statistical purposes to this district, but as the case was not notified here it does not appear in the infectious disease statistics for this district.

TABLE VII.

Disease	Total Notifications	Treated in Hospital	Total Deaths
Small pox	—	—	—
Scarlet Fever	—	—	—
Diphtheria	8	8	—
Enteric Fever (including Paratyphoid ..	—	—	—
Pneumonia	1	—	1
Puerperal Pyrexia	—	—	—
Erysipelas	1	—	—
Diphtheria Carriers	—	—	—

Total Notifications, 10. Total deaths from Infectious Diseases, 1.

NON-NOTIFIABLE DISEASES.

There was no serious outbreak of non-notifiable disease during 1938 in Horncastle.

PREVENTION OF BLINDNESS.

No action was taken under section 176 of the Public Health Act 1936. Infants suffering from Ophthalmia Neonatorum are treated by the private medical practitioner, for whose assistance Nurses are provided by the Lindsey County Council.

TUBERCULOSIS.

There were 8 new cases notified—4 pulmonary and 4 non-pulmonary. Two deaths occurred from Tuberculosis. One of these cases was notified during the year.

The notifications and deaths are shown in age-groups in tabular form below (as required by the Minister of Health).

TABLE VIII.

TUBERCULOSIS.

New Cases and Mortality during 1937.

Age Periods Years.	New Cases.				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female	Male	Female	Male	Female
0-1	—	—	—	1	—	—	—	—
1-5	—	—	1	1	—	—	1	—
5-10	1	—	—	—	—	—	—	—
10-15	—	—	—	—	—	—	—	—
15-25	—	—	—	—	—	—	—	—
25-35	1	—	—	1	—	—	—	—
35-45	—	—	—	—	—	1	—	—
45-55	1	—	—	—	—	—	—	—
55-65	1	—	—	—	—	—	—	—
65 & upwards	—	—	—	—	—	—	—	—
Total	4	—	1	3	—	1	<u>1</u>	<u>3</u>

REGISTER.

It was found that the manner in which the register had been kept precluded the preparation of any accurate figures. The numbers given for the previous year showed that on the 31st January, 1939, there were on the Register:

	Males.	Females.	Total.
Pulmonary	21	26	47
Non-pulmonary	2	13	15
Total	23	40	62

Examination of the register and enquiries and examination of Quarterly returns failed to show how these figures had been arrived at. Some names remaining on the Register were those of persons long since dead and who had been apparently returned as such. Others were known to have left the district months and, in some cases, years previously and no record of their having left the district could be found. It was therefore decided to trace out every name appearing on the register since 1912 and to commence a new register. This was done and it was found that many of the persons whose names appeared had disappeared from the district while some of the names which had been struck off were those of persons receiving attention at the Clinic and still living in the District. It will be realised therefore that it is almost impossible to account accurately for the differences in figures between those given for the 1st January and those for 31st December. It is known, however, that the latter figures are definitely an accurate statement of the number of notified cases of Tuberculosis now resident in the Urban District and steps are being taken to ensure their accuracy in the future. This will be relatively simple since the Medical Officer of Health is also Assistant County Tuberculosis Officer in charge of the Horncastle Clinic.

In addition to the deaths there were also three inward and three outward transfers in the course of the year.

On the 31st December there were:—

		Males.	Females.	Total.
Pulmonary	20	15	35
Non-pulmonary	1	5	6
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Totals	21	20	41
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No action was taken nor was any necessary under the Public Health (Prevention of Tuberculosis) Regulations of 1925 or under Section 172 of the Public Health Act 1936.

